



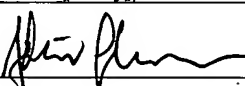
PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	28159	OR	<input checked="" type="checkbox"/> Correspondence address below
W. Brinton Yorks, Jr. Name					
Address					
City		State		ZIP	
Country		425-487-7152 Telephone		425-487-8135 Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Helen		Family Name or Surname	
Routh					
Inventor's Signature				Date	
New York Residence: City		NY State		USA Country	
United Kingdom Citizenship					
40 West 84 th Street, Apt. 7B Mailing Address					
New York City		NY State		10024 Zip	
USA Country					
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Adrian		Family Name or Surname	
Warner					
Inventor's Signature 				Date 4-16-03	
Bothell Residence: City		WA State		USA Country	
United States Citizenship					
3722 - 209 th Place SE Mailing Address					
Bothell City		WA State		98021 Zip	
USA Country					
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					



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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration
Submitted With Initial
Filing OR ☒ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number PHUS020537

First Named Inventor Helen Routh

COMPLETE IF KNOWN

Application Number 10/719,374

Filing Date 11/21/2003

Group Art Unit 3737

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Distributed Medical Imaging System and Method

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 11/21/2003 as United States Application Number or PCT International

Application Number 10/719,374 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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W. Brinton Yorks, Jr. Name					
Address					
City		State		ZIP	
Country		Telephone 425-487-7152		Fax 425-487-8135	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Helen		Family Name or Surname	
Inventor's Signature		Helen Routh		Date Apr 17, 2003	
New York		NY		USA	
Residence: City		State		Country	
40 West 84 th Street, Apt. 7B				United Kingdom	
Mailing Address				Citizenship	
New York		NY		10024	
City		State		Zip	
USA				Country	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Adrian		Family Name or Surname	
Inventor's Signature				Date	
Bothell		WA		USA	
Residence: City		State		Country	
3722 - 209 th Place SE				United States	
Mailing Address				Citizenship	
Bothell		WA		98021	
City		State		Zip	
USA				Country	
<input checked="" type="checkbox"/> Additional Inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					



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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Kevin Given Name		Bradley Family Name or Surname	
Inventor's Signature <i>Kevin Bradley</i>		Date <i>4/14/03</i>	
Bothell Residence: City	WA State	USA Country	United States Citizenship
9518 NE 140th Street Mailing Address			
Mailing Address			
Bothell City	WA State	98011 ZIP	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Earl Given Name		Canfield Family Name or Surname	
Inventor's Signature <i>Earl Canfield</i>		Date	
Snohomish Residence: City	WA State	USA Country	United States Citizenship
6010 - 150th Street SE Mailing Address			
Mailing Address			
Snohomish City	WA State	98296 ZIP	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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